

FRAMEWORK ACT ON HEALTH AND MEDICAL SERVICES

Act No. 6150, Jan. 12, 2000
Amended by Act No. 6909, May 29, 2003
Act No. 8852, Feb. 29, 2008
Act No. 9034, Mar. 28, 2008
Act No. 9847, Dec. 29, 2009
Act No. 9932, Jan. 18, 2010
Act No. 10131, Mar. 17, 2010
Act No. 11855, Jun. 4, 2013
Act No. 13649, Dec. 29, 2015
Act No. 14216, May 29, 2016
Act No. 14558, Feb. 8, 2017
Act No. 15883, Dec. 11, 2018
Act No. 16729, Dec. 3, 2019
Act No. 17472, Aug. 11, 2020

CHAPTER I GENERAL PROVISIONS

Article 1 (Purpose)

The purpose of this Act is to prescribe the rights and duties of nationals and the obligations of the State and local governments, with regard to health and medical services, and to provide for basic matters on the supply of and demand for health and medical services, thereby contributing to the development of health and medical services and the improvement of national health and welfare.

Article 2 (Basic Principles)

The basic principles of this Act are to ensure that all nationals pursue happiness with dignity and value as humans through health and medical services, to create systems and circumstances to help individual nationals lead a healthy life, and to promote balance between the equity and efficiency of health and medical services, thereby improving the quality of life of the nation.

Article 3 (Definitions)

The terms used in this Act are defined as follows:

1. The term "health and medical services" means all activities conducted by the State, local governments, health and medical institutions, health and medical services personnel, etc., with the purposes of protecting and improving national health;
2. The term "health and medical treatment services" means all activities conducted by health and medical services personnel with the purposes of protecting and improving national health;
3. The term "health and medical services personnel" means persons who acquire qualifications, licenses, etc. or are allowed to engage in providing health and medical treatment services under statutes related to health and medical services;
4. The term "health and medical institution" means any health care institution, medical institution, pharmacy or any other institution prescribed by Presidential Decree where health and medical services personnel provide health and medical treatment services to the public or many and specified persons;
5. The term "public health and medical institution" means any health and medical institution established and operated by the State, local governments or other public organizations;
6. The term "information on health and medical services" means knowledge or all kinds of data expressed in the form of code, figure, letter, voice, sound, image, etc., which are related to health and medical services.

Article 4 (Obligations of State and Local Governments)

- (1) The State and local governments shall endeavor to take legal and institutional measures necessary for protecting and improving national health and to secure financial resources necessary therefor.
- (2) The State and local governments shall endeavor to meet the demand for basic health and medical services of all nationals in an equitable manner.
- (3) The State and local governments shall endeavor to take measures to prevent potential harm from health-related items, such as foods, medical supplies, medical appliances, and cosmetics, or health-related activities, and to protect national health from various harmful factors.
- (4) The State and local governments may provide administrative and financial support for health and medical services offered by the private sector, when deemed necessary for policies on health and medical services.

Article 5 (Obligations of Health and Medical Services Personnel)

- (1) Health and medical services personnel shall endeavor to provide patients with high-quality and appropriate health and medical treatment services on the basis of their knowledge, experience and conscience.

(2) When health and medical services personnel are requested to provide health and medical treatment services, they shall not refuse to comply with such request, unless any justifiable ground exists otherwise.

(3) Health and medical services personnel shall endeavor to refer persons who receive health and medical treatment services to other health and medical institutions and provide the relevant data on health and medical services to such other health and medical institutions, when necessary for providing appropriate health and medical treatment services.

(4) When health and medical services personnel discover persons who have or are suspected to have diseases which need to be controlled by the State or local governments, they shall state, report, or notify such fact to the relevant institutions, or take other necessary measures.

Article 6 (Rights of Patients and Health and Medical Services Personnel)

(1) All patients shall have the right to receive appropriate health and medical treatment services to protect and improve their own health.

(2) Health and medical services personnel shall have the right to choose appropriate techniques for health and medical services, treatment materials, etc. based on their knowledge, experience and conscience, in rendering health and medical treatment services, so as to protect the health of patients: Provided, That this shall not apply where this Act or other Acts provide otherwise.

Article 7 (Correlation between Policies on Health and Medical Services and Social Security Policies)

The State and local governments shall endeavor to ensure correlation between policies on health and medical services and the relevant social security policies.

Article 8 (Participation of Nationals)

The State and local governments shall gather consensus from nationals, including interested persons, in developing and implementing policies on health and medical services which exert significant influence on the life of nationals, including the rights and duties of nationals.

Article 9 (Relationship to Other Acts)

When Acts on health and medical services are enacted or amended, such enactments or amendments shall comply with this Act.

CHAPTER II RIGHTS AND DUTIES OF NATIONALS CONCERNING HEALTH AND MEDICAL SERVICES

Article 10 (Right to Health)

- (1) All nationals shall have the right to live under the protection of the State, as prescribed by this Act or other Acts, with regard to their health and that of their families.
- (2) No rights of nationals with regard to their health and that of their families shall be infringed on the grounds of gender, age, religion, social status, financial circumstances, etc.

Article 11 (Right to Know about Health and Medical Services)

- (1) All nationals shall have the right to request disclosure of the details of policies on health and medical services of the State and local governments, as prescribed by relevant statutes.
- (2) All nationals may request health and medical services personnel or health and medical institutions to allow them to peruse their own records related to health and medical services or deliver copies thereof to them, as prescribed by relevant statutes: Provided, That when the principals cannot make such requests, their spouses, lineal ascendants, lineal descendants, or the lineal ascendants of the spouses may make such requests, and when the spouses, lineal ascendants, lineal descendants, or the lineal ascendants of such spouses do not exist or cannot make such requests themselves due to diseases or other inevitable grounds, agents designated by such principals may request perusal, etc. of the relevant records.

Article 12 (Right to Decide on Health and Medical Treatment Services)

All nationals shall have the right to receive full explanations from health and medical services personnel on methods for treating their diseases, whether they are subject to medical research, whether they require organ transplants, etc. and then to decide whether to agree with the aforementioned.

Article 13 (Guarantee of Confidentiality)

No confidential information about the body, health or private life of nationals shall be revealed, with regard to health and medical services.

Article 14 (Duties of Nationals concerning Health and Medical Services)

- (1) All nationals shall endeavor to protect and improve their health and that of their families, and shall bear expenses necessary for protecting and improving health, as prescribed by relevant statutes.
- (2) No one shall disseminate or advertise information harmful to health, sell or provide equipment and articles harmful to health, or do other acts which undermine or are likely to undermine the health of others.
- (3) All nationals shall cooperate in justifiable health and medical treatment services and guidance provided by health and medical services personnel.

**CHAPTER III FORMULATION AND IMPLEMENTATION OF
PLANS FOR DEVELOPMENT OF HEALTH AND
MEDICAL SERVICES**

Article 15 (Formulation of Plans for Development of Health and Medical Services)

(1) The Minister of Health and Welfare shall formulate a plan for the development of health and medical services every five years, after consultation with the heads of related central administrative agencies and deliberation by the Health and Medical Services Policy Deliberation Committee established under Article 20.

(2) Plans for the development of health and medical services shall include the following matters:
<Amended on May 29, 2016>

1. Basic objectives in the development of health and medical services and the direction for promoting such development;
 2. Major plans for projects for health and medical services and the methods of promoting such plans;
 3. Measures to secure and manage resources for health and medical services;
 4. Policies for managing the total number of sickbeds of each region;
 5. Policies for boosting the efficiency of health and medical services, such as establishment of the system for providing and using health and medical services;
 6. Integration and coordination of duties concerning health and medical services between central administrative agencies;
 7. Plans for projects for health and medical services aimed at disadvantaged classes, such as senior citizens or persons with disabilities;
 8. Measures to manage statistics and information on health and medical services;
 9. Other matters deemed particularly necessary for the development of health and medical services.
- (3) Plans for the development of health and medical services shall be finalized after deliberation by the State Council.

Article 16 (Formulation and Implementation of Measures to Promote Major Policies)

When a plan for the development of health and medical services is finalized, the Minister of Health and Welfare and the heads of the relevant central administrative agencies shall, based on such plan, formulate and implement measures to promote major policies on health and medical services under their jurisdiction each year.

Article 17 (Formulation and Implementation of Regional Plans for Health and Medical Services)

When a plan for the development of health and medical services is finalized, the Special Metropolitan City Mayor, a Metropolitan City Mayor, a Do Governor, a Special Self-Governing Province Governor (hereinafter referred to as "Mayor/Do Governor"), and the head of a Si/Gun/Gu (referring to an autonomous Gu; hereinafter the same shall apply) shall formulate and implement regional plans for health and medical services, as prescribed by related statutes, taking into account the conditions of the relevant local governments.

Article 18 (Cooperation in Formulation of Plans)

(1) The Minister of Health and Welfare, the head of the relevant central administrative agency, a Mayor/Do Governor, and the head of a Si/Gun/Gu may request related institutions, organizations, etc. to provide cooperation, such as submission of data, when necessary for formulating and implementing plans for the development of health and medical services, measures to promote major policies under their jurisdiction, and regional plans for health and medical services.

(2) The relevant institutions, organizations, etc., upon receipt of a request for cooperation under paragraph (1), shall comply with such request unless any special ground exists otherwise.

Article 18-2 (Report to the National Assembly)

The Minister of Health and Welfare shall each year determine major details of plans for the development of health and medical services, measures to promote major policies of the pertinent year under Article 16, and the promotion performance of the previous year, and shall without delay report the same to the standing committee under the National Assembly's jurisdiction.

Article 19 (Subsidization of Expenses)

The State may, within budgetary limits, provide local governments with subsidy to cover all or part of expenses incurred in implementing regional plans for health and medical services.

Article 20 (Health and Medical Services Policy Deliberation Committee)

The Health and Medical Services Policy Deliberation Committee (hereinafter referred to as the "Committee") shall be established under the jurisdiction of the Minister of Health and Welfare, with the purpose of deliberating on major policies on health and medical services.

Article 21 (Composition of Committee)

(1) The Committee shall be comprised of not more than 20 members, including one chairperson, and the members who are not public officials shall be a majority of the total number of the members. <Amended on Dec. 11, 2018>

(2) The chairperson shall be the Minister of Health and Welfare.

(3) Members of the Committee shall be appointed or commissioned by the Minister of Health and Welfare from among the following persons:

1. Public officials of the relevant central administrative agencies prescribed by Presidential Decree;
2. Persons who represent the consumers of health and medical services;
3. Persons who represent the suppliers of health and medical services;
4. Persons with abundant academic knowledge and experience in health and medical services.

(4) Working committees shall be established under the jurisdiction of the Committee with a view to efficiently managing its meetings, and subcommittees may be established by area with a view to examining matters subject to deliberation by the Committee in a more professional manner.

(5) The organization and operation of the Committee, working committees, and subcommittees, and other necessary matters shall be prescribed by Presidential Decree, except as otherwise prescribed in this Act.

Article 22 (Functions of Committee)

The Committee shall deliberate on the following matters:

1. Plans for the development of health and medical services;
2. Improvement of the main systems of health and medical services;
3. Major policies on health and medical services;
4. Roles of the State and local governments with regard to health and medical services;
5. Other matters referred by the chairperson for deliberation.

Article 23 (Cooperation of Relevant Administrative Agencies)

(1) The Committee may request the relevant administrative agencies to submit data on health and medical services and to provide necessary cooperation with regard to duties of the Committee.

(2) The relevant administrative agencies, upon receipt of a request under paragraph (1), shall comply with such request, unless any special ground exists otherwise.

CHAPTER IV MANAGEMENT OF RESOURCES FOR HEALTH AND MEDICAL SERVICES

Article 24 (Management of Resources for Health and Medical Services)

(1) The State and local governments shall formulate comprehensive and systematic policies, in order to develop and secure resources for health and medical services, such as human resources, facilities, goods, knowledge and technology related to health and medical services.

(2) The State and local governments shall manage resources for health and medical services to ensure that such resources are supplied appropriately, by predicting the short- and long-term demand for resources for health and medical services.

Article 25 (Fostering Human Resources for Health and Medical Services)

The State and local governments shall formulate necessary policies to foster excellent human resources for health and medical services and improve the capabilities of such human resources, including education programs.

Article 26 (Cooperation among Health and Medical Services Personnel)

Health and medical services personnel shall endeavor to cooperate with each other in each specialized field or between specialized fields in providing health and medical services, so as to provide high-quality health and medical services to nationals and contribute to improving national health.

Article 27 (Sharing Roles between Public and Private Health and Medical Institutions)

- (1) The State and local governments shall establish a system for sharing roles and promoting cooperation between public health and medical institutions and private health and medical institutions.
- (2) When necessary for meeting demand for basic health and medical services under Article 4 (2), the State and local government may establish and operate public health and medical institutions and provide subsidy to cover all or part of expenses incurred in such establishment or operation.
- (3) The State and local governments shall formulate and implement necessary policies to efficiently operate and manage public health and medical services.
- (4) Basic matters regarding public health and medical services, such as the establishment and operation of public health and medical institutions, shall be separately prescribed by law.

Article 28 (Knowledge and Technology concerning Health and Medical Services)

- (1) The State and local governments shall formulate and implement necessary policies for the development of knowledge and technology concerning health and medical services.
- (2) The Minister of Health and Welfare shall endeavor to take necessary measures to provide efficient health and medical treatment services, such as the evaluation of new technology concerning health and medical services.

CHAPTER V PROVISION AND USE OF HEALTH AND MEDICAL SERVICES

SECTION 1 System for Providing and Using Health and Medical Services

Article 29 (System for Providing and Using Health and Medical Services)

- (1) The State and local governments shall endeavor to ensure that resources for health and medical services including human resources, facilities and goods are equally distributed across regions and health and medical treatment services are provided in a balanced manner, and to establish a system for providing and using health and medical services for the purposes of efficiently providing high-quality health and medical treatment services.
- (2) The State and local governments may take administrative and financial measures necessary for establishing a system for providing and using health and medical services, and provide other necessary support therefor.

Article 30 (System for Emergency Medical Services)

The State and local governments shall establish a system for emergency medical services to ensure that all nationals (including foreigners staying in Korea) can receive swift and appropriate emergency medical services in an emergency. <Amended on Jun. 4, 2013>

SECTION 2 System of Lifelong Health Care for Citizens

Article 31 (Projects for Lifelong Health Care for Citizens)

- (1) The State and local governments shall implement projects for lifelong health care for citizens, taking into account health characteristics of each life cycle and major health risk factors.
- (2) The State and local governments shall develop policies necessary to ensure that public health and medical institutions can play a pivotal role in the projects for lifelong health care for citizens.
- (3) The State and local governments shall nurture specialized human resources to be in charge of health guidance, health education, etc., establish the health care information system, and develop other policies necessary to facilitate implementation of projects for lifelong health care for citizens.

Article 32 (Improvement of Health of Women and Children)

The State and local governments shall formulate policies necessary to protect and promote the health of women and children. In such cases, the State and local governments shall ensure that policies to promote women's health reflect characteristics of each age group. <Amended on Dec. 29, 2015>

Article 33 (Improvement of Health of Senior Citizens)

The State and local governments shall formulate policies necessary to protect and improve the health of senior citizens for the purposes of early diagnosing and preventing diseases of senior citizens, and ensuring appropriate treatment and medical care for them, depending on the conditions of diseases.

Article 34 (Promoting Health of Persons with Disabilities)

The State and local governments shall prevent inborn or acquired disabilities, assist in the treatment and rehabilitation of persons with disabilities, and formulate other policies necessary to protect and promote their health.

Article 35 (School Health and Medical Services)

The State and local governments shall formulate policies necessary to help the sound growth of students, to protect and promote their health, and to cultivate life habits, emotions, etc. required for students' growth into healthy adults.

Article 36 (Industrial Health and Medical Services)

The State shall formulate necessary policies to protect and promote the health of workers.

Article 37 (Environmental Health and Medical Services)

The State and local governments shall formulate policies necessary to maintain a comfortable environment and prevent any harm to health caused by environmental pollution, so as to protect and promote national health.

Article 37-2 (National Health Impact Assessment due to Climate Change)

(1) In order to protect and promote national health, the Commissioner of the Korea Disease Control and Prevention Agency shall examine and assess the impacts of climate change, such as global warming, on national health (hereinafter referred to as "climatic health impact assessment") every five years and publish the results of the examination and assessment, and utilize such results as basic data for the formulation of policies. *<Amended on Aug. 11, 2020>*

(2) The Commissioner of the Korea Disease Control and Prevention Agency may conduct fact-finding research in order to obtain basic data and prepare statistics necessary for climatic health impact assessment. *<Amended on Aug. 11, 2020>*

(3) The Commissioner of the Korea Disease Control and Prevention Agency may request the head of a central administrative agency, the head of a local government and the head of an institution or organization related to medical services to provide data necessary for climatic health impact assessment or to cooperate in fact-finding research conducted under paragraph (2). In such cases, the head of a central administrative agency, etc. requested to provide data or cooperate in fact-finding research shall comply with such request unless he/she has a justifiable reason. *<Amended on Aug. 11, 2020>*

(4) Necessary matters concerning specific details, methods, etc. of climatic health impact assessment and fact-finding research shall be prescribed by Presidential Decree.

Article 38 (Food Hygiene and Nutrition)

The State and local governments shall formulate policies necessary to prevent any harm to health caused by food and to improve the nutritional conditions of nationals, so as to protect and promote national health.

SECTION 3 System for Managing Major Diseases

Article 39 (Establishment of System for Managing Major Diseases)

The Minister of Health and Welfare shall select diseases that particularly need to be managed by the State, from among diseases that may cause considerable harm to national health, and formulate and implement

policies necessary for managing such diseases.

Article 40 (Prevention and Management of Infectious Diseases)

The State and local governments shall formulate and implement policies necessary for preventing outbreaks and prevalence of infectious diseases, providing appropriate health and medical services to patients with infectious diseases, and managing such diseases.

Article 41 (Prevention and Management of Chronic Diseases)

The State and local governments shall formulate and implement policies necessary for preventing outbreaks and spread of major chronic diseases, such as cancer and hypertension, providing appropriate health and medical services to patients with chronic diseases, including patients with end-stage diseases, and managing such diseases.

Article 42 (Mental Health and Medical Services)

The State and local governments shall formulate and implement policies necessary for promoting the mental health of nationals, such as preventing mental diseases, treating patients with mental diseases and helping such patients to reintegrate into society.

Article 43 (Oral Health and Medical Services)

The State and local governments shall formulate and implement policies necessary for promoting the oral health of nationals, such as preventing and treating oral diseases and managing oral health.

CHAPTER VI SUPPORT AND DEVELOPMENT OF HEALTH AND MEDICAL SERVICES

Article 44 (Pilot Projects for Health and Medical Services)

(1) The State and local governments may conduct pilot projects, when necessary for implementing a new system of health and medical services.

(2) When the State and local governments have conducted pilot projects under paragraph (1), they shall evaluate the outcomes thereof and reflect such outcomes in the new system of health and medical services to be implemented.

Article 45 (Provision of Health and Medical Treatment Services to Disadvantaged Classes)

(1) The State and local governments shall formulate and implement policies necessary to provide appropriate health and medical treatment services to disadvantaged classes, including senior citizens and persons with disabilities.

(2) The State and local governments shall formulate and implement policies necessary to protect and promote the health of farmers, fishermen. etc.

Article 46 (Dispute Resolution)

(1) The State and local governments shall formulate policies necessary to settle disputes arising in respect of health and medical treatment services in a swift and fair manner.

(2) The State and local governments shall formulate policies necessary to facilitate relief of any damage or loss caused by health and medical treatment services.

Article 47 (Expenses Borne by Persons who Cause Harm to National Health)

The State and local governments may require persons who produce or sell goods, etc. which cause or are likely to cause harm to national health, to bear expenses incurred in protecting and promoting national health, as prescribed by relevant statutes.

Article 48 (Promotion of Industries Related to Health and Medical Services)

The State and local governments shall formulate policies necessary to promote industries related to health and medical services, such as the research and development of health and medical services technology or support therefor.

Article 49 (Fostering and Development of Oriental Medical Services)

The State and local governments shall endeavor to foster and develop Oriental medical services.

Article 50 (International Cooperation)

The State and local governments shall exchange information and technology related to health and medical services through cooperation with foreign governments and international organizations, etc., train specialized human resources, and actively participate in international endeavors for the development of health and medical services.

Article 51 (Evaluation of Projects for Health and Medical Services)

The State and local governments shall evaluate the outcomes of major projects for health and medical services each year and reflect such outcomes in policies on health and medical services.

Article 52 (Evaluation of Health and Medical Treatment Services)

The Minister of Health and Welfare shall conduct an evaluation of health and medical treatment services under relevant statutes, so as to improve the quality of health and medical treatment services.

CHAPTER VII MANAGEMENT OF STATISTICS AND INFORMATION ON HEALTH AND MEDICAL SERVICES

Article 53 (Policies on Management of Statistics and Information on Health and Medical Services)

The State and local governments shall formulate and implement necessary policies to collect and manage statistics and information on health and medical services and utilize such statistics and information for policies on health and medical services.

Article 54 (Facilitation of Informatization of Health and Medical Services)

The State and local governments shall formulate policies necessary to facilitate the informatization of health and medical services.

Article 55 (Fact-Finding Surveys on Health and Medical Services)

(1) The Minister of Health and Welfare shall conduct nationwide fact-finding surveys on health and medical services, such as the national demand for health and medical services, trends in using such services, or human resources, facilities and materials related to health and medical services and publish the results of such surveys: Provided, That where deemed necessary to formulate policies on health and medical services, temporary fact-finding surveys on health and medical services may be conducted.

<Amended on Dec. 3, 2019>

(2) The Minister of Health and Welfare may request relevant central administrative agencies, local governments, or related institutions, corporations, or organizations to provide data or state opinions in order to conduct fact-finding surveys under paragraph (1). In such cases, a person in receipt of such request shall comply therewith, unless there is good cause. *<Amended on Dec. 3, 2019>*

(3) Matters necessary for the details, methods, publication, etc. of fact-finding surveys conducted under paragraph (1) shall be prescribed by Presidential Decree. *<Newly Inserted on Dec. 3, 2019>*

Article 56 (Dissemination and Expansion of Information on Health and Medical Services)

The Minister of Health and Welfare shall formulate policies necessary to widely disseminate and expand information on health and medical services held by health and medical institutions and other related institutions and organizations.

Article 57 (Facilitation of Standardization of Information on Health and Medical Services)

The Minister of Health and Welfare shall formulate policies to standardize the information on health and medical services, in order to efficiently manage information on health and medical services and ensure compatibility.

ADDENDUM <Act No. 6150, Jan. 12, 2000>

This Act shall enter into force six months after the date of its promulgation.

ADDENDA <Act No. 6909, May 29, 2003>

Article 1 (Enforcement Date)

This Act shall enter into force one year after the date of its promulgation.

Articles 2 through 6 Omitted.

ADDENDA <Act No. 8852, Feb. 29, 2008>

Article 1 (Enforcement Date)

This Act shall enter into force on the date of its promulgation: Provided, That ... <omitted> ... amendments to Acts, which were promulgated before this Act enters into force but the enforcement dates of which have yet to arrive, among the Acts amended under Article 6 of these Addenda, shall enter into force on the enforcement dates of relevant Acts, respectively.

Articles 2 through 7 Omitted.

ADDENDUM <Act No. 9034, Mar. 28, 2008>

This Act shall enter into force six months after the date of its promulgation.

ADDENDA <Act No. 9847, Dec. 29, 2009>

Article 1 (Enforcement Date)

This Act shall enter into force one year after the date of its promulgation.

Articles 2 through 22 Omitted.

ADDENDA <Act No. 9932, Jan. 18, 2010>

Article 1 (Enforcement Date)

This Act shall enter into force two months after the date of its promulgation. (Proviso Omitted.)

Articles 2 through 5 Omitted.

ADDENDUM <Act No. 10131, Mar. 17, 2010>

This Act shall enter into force three months after the date of its promulgation: Provided, That the amended provisions of Article 40 shall enter into force on December 30, 2010.

ADDENDUM <Act No. 11855, Jun. 4, 2013>

This Act shall enter into force on the date of its promulgation.

ADDENDUM <Act No. 13649, Dec. 29, 2015>

This Act shall enter into force on the date of its promulgation.

ADDENDUM <Act No. 14216, May 29, 2016>

This Act shall enter into force six months after the date of its promulgation.

ADDENDUM <Act No. 14558, Feb. 8, 2017>

This Act shall enter into force six months after the date of its promulgation.

ADDENDA <Act No. 15883, Dec. 11, 2018>

Article 1 (Enforcement Date)

This Act shall enter into force six months after the date of its promulgation.

Article 2 (Applicability to Organization of Committee)

The amended provisions of Article 21 (1) shall begin to apply to the appointment or commission of members of the Committee after this Act enters into force.

ADDENDUM <Act No. 16729, Dec. 3, 2019>

This Act shall enter into force six months after the date of its promulgation.

ADDENDA <Act No. 17472, Aug. 11, 2020>

Article 1 (Enforcement Date)

This Act shall enter into force one month after the date of its promulgation: Provided, That ... <omitted>
... amendments to Acts, which were promulgated before this Act enters into force but the enforcement dates of

which have yet to arrive, among the Acts amended under Article 4 of these Addenda, shall enter into force on the enforcement dates of relevant Acts, respectively.

Articles 2 through 5 Omitted.

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